

John Flynn <JFlynn@afphq.org> on 10/23/2010 06:12:56 PM

To:

""2022190174@fec.gov"" <2022190174@fec.gov>

cc

Subject: FEC Form 9

Attached please find FEC Form 9 filed on behalf of Americans for Prosperity.

John Flynn

Executive Vice President and General Counsel Americans for Prosperity
Suite 350
2111 Wilson Blvd.
Arlington, VA 22201
(703) 224-3200 office
(703) 224-3201 facsimile
iflynn@afphq.org
www.AmericansForProsperity.org



FEC Form 9 - 10-22-10.pdf

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/obligat				
(a) Name Americans for Prosp	enty			
(b) Address (number and street) Check if different 2111 Wilson Blud Suite				
(c) City State and ZIP Code 2220	C			
(d) Name of Employer or Principal Place of Business	(e) Occupation			
3. Is This Statement or	4. Covering Period 10 20 7010			
Amended	10 22 2010			
5. (a) Date of Public Distribution(s) 7 0 7	2 2010 (b) Communication Title 4 Yes Man 4			
6. The filer is a(n): (a) Individual (b) Unino	corporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)			
(d) X Corporation, Labor Organization or Qua	alified Nonprofit Corporation making communications under 11 CFR 114.15			
(e) Other, specify:				
	d organization or qualified nonprofit corporation, Yes No			
8. Custodian of Records	ly from donations to a segregated bank account?			
(a) Name Steve Mullins				
(b) Address (number and street) 2111 Wilson Blud, Suite 350				
(c) City, State and ZIP Code Archington, VA 2220 (d) Name of Employer or Principar Place of Business				
λ	/ N T T T T T T T T T T T T T T T T T T			
Americanster Prosp	serity uto			
9. Total Donations This Statement				
10. Total Disbursements/Obligations This Sta	atement 24, 169,00			
Under penalty of perjury. I certify that this stateme				
TYPE OR PRINT NAME OF PERSON COMPLETING FORM JOHN FLYNN				
SIGNATURE SHUTH	DATE 10/22/10			

Pers	Person(s) Sharing/Exercising Control			
A.	(a) Name Tim Phillips			
	(b) Address (number and strate) 211 Wilson Blud, Svite 350			
	(c) City. State and ZIP Code. AMINITON, VA 22201			
	(d) Name of Employer or Principal Place of Business ANNER CAN S FOR PRINCIPAL PLACE OF BUSINESS	(e) Occupation		
В.	(a) Name John Hynn			
	(b) Address (number and street) Son Blud, Suit 350			
	(c) City. State and ZIP Code ATIMITON, VA 77201			
	(d) Name of Employer at Principal Place of Business AMUNICAN STOR PROSPERTY	(a) Occupation Jeensurer		
C.	(a) Name Steve Mullins			
	(b) Address (number and street) Son Blue, Swite 350			
	(c) City, State and ZIP Code ATMINSTON, VA: 22201			
	(d) Name of Employer & Principal Place of Business AMERICANS For Prospectify	(e) Occupation		
D:	(a) Name			
	(b) Address (number and street)			
	(c) City, State and ZIP Code			
	(d) Name of Employer or Principal Place of Business	(e) Occupation		
E.	(a) Name			
	(b) Address (number and street)			
	(c) City, State and ZIP Code			
	(d) Name of Employer or Principal Place of Buşlness	(e) Occupation		

SCHEDULE 9-A

PAGE OF	4
---------	---

Α.	Full Name of Donor			Date of Receipt
. •	Mailing Address of Donor			Amount
	City	State	Zip	,
В.	Full Name of Donor			Date of Receipt
,	Mailing Address of Donor	v 		Amount
	City	State	Zip	
C.	Full Name of Donor			Date of Receipt
	Mailing Address of Donor			Amount
	City	State	Zip	
D.	Full Name of Donor			Date of Receipt
,	Mailing Address of Donor			Amount
	City	State	Zip	,
E.	Full Name of Donor		•9	Date of Receipt
	Mailing Address of Donor	•••		Amount
	City	State	Zip	
вто	DTAL of Donations This Page (optional)		
	······································			_

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE# 0	f 4
---------	-----

A. Full Name (Last, First, Middle Initial) of Payee	Date of Disbursement or Obligation
Blockade Runner	10 20 2010
Mailing Address of Payee //	Amount
State Zip: Code	5.400.00
Enderprise AL 36330	Communication Date
Name of Employer Occupation	_
	10 21 2010
Purpose of Disbursement (Including title(s) of communication(s)) Placement of WIC Adler	
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For: Primary General
John Adler Senate District: 03	Other (specify)
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:
Senate District:	Primary General
Name of Federal Candidate. Office Sought: House	Other (specify) Disbursement/Obligation For:
State:	Primary General
President District:	Other (specify)
B. Full Name (Last, First, Middle Initial) of Payee	Date of Disbursement or Obligation
Campaign Now, LCC	10 21 2010
Mailing Address of Rayee	Amount
1126 S Toth Street, Suite S420 State Zip Codo	18.769.00
Milway (Cee W1 53214	Communication Date
Name of Employer Occupation	70 22 2010
Purpose of Disbursement (Including title(s) of communication(s)) Place Went of 164-es Man "Radio Spot	
I blasse of Contact Constitution Office Country CCS blasses ! A 67	Disbursement/Obligatjon For:
Senate State	Primary General
Chad lau seey Senate District: Of	Other (specify)
Namo of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:
Senate District:	Primary General Other (specify)
Name of Federal Candidate Office Sought: House	Disbursement/Obligation For:
State:	Primary General
President District:	Other (specify)
SUBTOTAL of Disbursements/Obligations This Page (optional)	24/69 00
TOTAL This Period (last page this line number only)	- •
(carry total from last page to Line 10)	

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): E-Mail 10/23/2010 10/25/2010 JB **PREPARER** DATE PREPARED

(3/2005)